TO STATE OF THE PARTY OF THE PA

UNITED STATES WIRONMENTAL PROTECTION AGE. J REGION V

111 West Jackson Blvd. CHICAGO, ILLINOIS 80604

REPLY TO ATTENTION OF:

RCRA ACTIVITIES

Mr. Earl C. Guinn Monsanto Industrial Chemical Company 260 Springside Drive Akron, Ohio 44313

RE: Interim Status Acknowledgement USEPA ID No. OHD 071 112 239 FACILITY NAME: MONSANTO INDUSTRIAL CHEMICAL COMPANY

Dear Mr. Guinn:

This is to acknowledge that the U.S. Environmental Protection Agency (USEPA) has completed processing your Part A Hazardous Waste Permit Application. It is the opinion of this office that the information submitted is complete and that you, as an owner or operator of a hazardous waste management facility, have met the requirements of Section 3005(e) of the Resource Conservation and Recovery Act (RCRA) for Interim Status. However, should USEPA obtain information which indicates that your application was incomplete or inaccurate, you may be requested to provide further documentation of your claim for Interim Status. Our opinion will be reevaluated on the basis of this information.

As an owner or operator of a hazardous waste management facility, you are required to comply with the interim status standards as prescribed in 40 CFR Parts 122 and 265, or with State rules and regulations in those States which have been authorized under Section 3006 of RCRA. In addition, you are reminded that operating under interim status does not relieve you from the need to comply with all applicable State and local requirements.

The printout enclosed with this letter identifies the limit(s) of the process design capacities your facility may use during the interim status period. This information was obtained from your Part A Permit application. If you wish to handle new wastes, to change processes, to increase the design capacity of existing processes, or to change ownership or operational control of the facility, you may do so only as provided in 40 CFR Sections 122.22 and 122.23.

As stated in the first paragraph of this letter, you have met the requirements of 40 CFR Part 122.23; your facility may operate under interim status until such time as a permit is issued or denied. This will be preceded by a request from this office or the State (if authorized) for Part B of your application. Please contact Arthur Kawatachi of my staff at (312) 886-7449, if you have any questions concerning this letter or the enclosure.

Sincerely yours.

Karl J. Klepitsch, Jr., Chief

Waste Management Branch

Enclosure

cc: Earle H. Harbison, Jr.



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY (VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

* OHDO71112239 REACKNOWLEDGEMENT

MONSANTO INDUSTRIAL CHEMICAL COMPANY
260 SPRINGSIDE DRIVE
AKRON OH 44313

1NSTALLATION ADDRESS AKRON OH 44313

EPA Form 8700-12B (4-80)

09/29/81

INSTRUCTIONS: If you received a preprinter label, affix it in the space at left. If any of the information on the label is incorrect, draw a line though it and apply the property of the label is incorrect.
label, affix it in the space at left. If any of th information on the label is incorrect, draw a lin
through it and supply the correct information in the appropriate section below. If the label is
complete and correct, leave Items I, II, and II below blank. If you did not receive a preprinter
label, complete all items, "Installation" means single site where hazardous waste is generated treated, stored and/or disposed of, or a transporter's principal place of business. Please refe
the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).
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IP CODE
4313
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IP CODE
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PHONE NO. (area code & no.)
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(enter "X" in the appropriate box(es))
D. UNDERGROUND INJECTION
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ER (specify):
azardous waste activity or a subsequent notification below.
c. Installation's EPA I.D. No.

EPA Form 8700-12 (6-80)

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CONTINUE ON REVERSE



DATE SIGNED

8-15-80

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NAME & OFFICIAL TITLE (type or print)

Director, Technology

EPA Form 8700-12 (6-80) REVERSE

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False information, including the possibility of fine and imprisonment. A. NAME & OFFICIAL TITLE (type or print) Earle H. Harbison, Jr., Group Vice President & Managing Director COMMENTS FOR OFFICIAL USE ONLY	attachments and that, based on my inquiry of those	persons immediately responsible	for obtaining the information contained in t	the
Earle H. Harbison, Jr., Group Vice President & Managing Director COMMENTS FOR OFFICIAL USE ONLY			out there are significant penalties for submitti \hat{N}	ing
Vice President & Managing Director COMMENTS FOR OFFICIAL USE ONLY	A. NAME & OFFICIAL TITLE (type or print)	THE TANK OF THE PROPERTY OF TH	C. DATE SIGNED	
COMMENTS FOR OFFICIAL USE ONLY		ESTALL &	11/11/82)
	COMMENTS FOR OFFICIAL USE ONLY	TO STORE THE STATE OF THE STATE		

Name a state	. In Alan	enes only					* A\$.E			
Please print or type fili_in_areas:are.sp		reas only . i.e., 12 characters/i.	nch).	months (New Arrange)	TO SHE COREO MICOS CONTRACTOR AND AND AND	Form	Approved Ol	MB No. 158-S	80004	
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FOR OFFICIAL			ne de la companya de				-			
	(yr. mo. & day)				COM	MENTS				
II. FIRST OR R								Alexander (Contract)		
Place an "X" in the revised application EPA I.D. Number i	. If this is your firs	n A or B below <i>(mar</i> st application and yo	rk one box only) to ou already know yo	i indicati ur facili	e whether this ty's EPA I.D. I	is the first applicat Number, or if this is	ion you are su s a revised app	ibmitting for ofication, ente	your facil r your fac	lity or a cility's
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CUBIC METER	DAY	C	GALLONS PER LITERS PER HO			, E H				
EXAMPLE FOR	COMPLETING ITE	EM III <i>(shown in line</i> ility also has an incir	numbers X-1 and	X-2 belo	ow): A facility	y has two storage to	nks, one tank	can hold 200	gallons a	and the
s l		T/A C. \	T T T	777	7 / / /	7777	111	777	()	111
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1 s 0 1	11,00	00 gallons/yr	, G	AN PER VALUE COLUMN	7					
2				100	8					

4

9

10

C. SPACE FOR ADDITIONAL PROCESS CODES	OR FOR DESCRIBING OTHER PROCESSES ($code$ " $T0$ -	 FOR EACH PROCESS ENTERED HERE
THE RESERVE OF THE PROPERTY OF		

IV. DESCRIPTION OF HAZARDOUS WASTES

- A. EPA HAZARDOUS WASTE NUMBER Enter the four—digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four—digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.
- B. ESTIMATED ANNUAL QUANTITY For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non—listed waste(s) that will be handled which possess that characteristic or contaminant.
- C. UNIT OF MEASURE For each quantity entered in column 8 enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

	ENGLISH	UNITOF	MEASUF	36	COD	E	METRICU	NIT OF ME	ASURE	CODE
: :	POUNDS.				P		KILOGRA	vis		
:	TONS						METRICT	ons		Mi

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code/s/ from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

- Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual
 quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
- In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter
 "included with above" and make no other entries on that line.
- 3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

	A. EPA		C. UNIT		D. PROCESSES						
HAZARD. SO WASTENO JZ (enter code)		B. ESTIMATED ANNUAL QUANTITY OF WASTE	OF MEA- SURE (enter code)		1		SS CODE:	\$	2. PROCESS DESCRIPTION (if a code is not entered in D(1))		
X-1	K 0 5 4	900	P	T 0	3	D 8 0		7			
X-2	$D \mid 0 \mid 0 \mid 2$	400	P	$T^{1}0$	3	$D^{\prime} 8^{\prime} 0$					
X-3	$D \mid 0 \mid 0 \mid I$	100	P	T = 0	3	$D^{\prime}8^{\prime}0$					
X-4	$D \mid 0 \mid 0 \mid 2$							N de	included with above		

	PA	1.0	. NI	JME	BER (enter from page 1)	1	1	- September		FOR OFFICIAL US	
w O	Н	D	100	7	1112239 3 1	1	'		8 W	DUP	7/A © DUP \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
IV. I					N OF HAZARDOUS WAST				ied)	id.	Care Williams
Z S S S S S S S S S S S S S S S S S S S	WA	ST	PA ARI EN coo	0.	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C	UN ME URI ente ode	1	-17	1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
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26	23		1	26	27 - 3	_	36	-	27 -	29 27 " 20 27 - 20 27 -	

1. NAME OF F	ACILITY'S LEGAL OWNER	. 2	. PHONE NO. (area code & no.)
E			
3. STREET OR P.O. BOX	4. CITY OR TOWN	55 156 5.ST.	- 52 159 : 61 162 65 6. ZIP CODE
E	C G	40 22 42	

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

Earle H. Harbison, Jr., Group

Vice President & Managing Director

C. DATE SIGNED

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete, I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

C. DATE SIGNED



· Wishiash.



Monsanto

MONSANTO POLYMER PRODUCTS COMPANY 260 Springside Drive Akron, Ohio 44313 Phone: (216) 668-4111

February 28, 1984

U. S. EPA
Region V
RCRA Activities
P. O. Box 7861
Chicago, Illinois 60680

Gentlemen:

We are a small quantity generator of hazardous waste at this location, and therefore not currently required to submit a federal hazardous waste report. However, we would like to keep you appraised of our activities by supplying copies of the hazardous waste reports submitted to the Ohio Environmental Protection Agency for the years 1982 and 1983.

Please contact me if you have any questions regarding these reports.

Sincerely,

Earl C. Guinn

Storeroom Supervisor

Enclosures

cc: R. W. Wise, Monsanto Company

W. K. Phillips, Monsanto Company

Akron Montrose Marketing & Research Center

Permits and Registrations

AIR Ohio EPA Air Pollution Source Premise # 1677000065

Registration Status

Registered Sources B001 Boiler #1

B002 Boiler #1

Paid 12/01/94

B003 Boiler #2 (Eclipse)

P001 Rubber Lab

P002 Carbon Black Dust Arrestor

P003 Ozone Chambers P004 Fume Hoods

WATER Wastewater Connection Permit # 28638

Status: Non-significant Industrial User

RCRA EPA ID #OHD 071112239

Cost/year = \$350

Status: Small Quantity Generator

RCRA History: OEPA inspection 12/02/82

03/22/90

USEPA inspection 05/22/91

Minor deficiencies were noted and corrected in '82 and '90. No fines or penalties were assessed.

OSHA SIC #8731

Risk SI-3421

OSHA History: No OSHA inspections or complaints

C''O ENVIRONMENTAL PROTECTION ENCY

GENERATOR ANNUAL HAZARDOUS WASTE REPORT (cont.)

For the calendar year ending December 31, 1982

FACILITY INFORMATION

(specify facility to which all wastes on this page were sent)

VIII. GENERATOR'S EPA I.D. NO.

[GO]HDO17111112233191 2

X. FA	ACILITY'S EPA I.D. NO. X. FACILITY NAME			3		
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XI. FA	ACILITY'S ADDRESS					
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City or					State Zip Co	de
LINE NUMBER NUMBER	WASTE IDENTIFICATION A. DESCRIPTION OF WASTE	B. D HAZ CL/	ARD	C. USEPA HAZARDOUS WASTE NUMBER (See Instructions)	D. AMOUNT OF WASTE	NIT OF TURE
1	Waste Solvent N.o.s.	0	7	400124121319	11118381	P
2				4/2/2/04/0/3/1		
3				시이쉬수		- "
4	Hazard Waste, Solid, N.O.S.	-1	Z	00014196	1111451912	P
5	(Lab Packs)					-
6		New York				
7	·					
8						
9			-			
10						
11 12						-
L	COMMENTS tenter information by section number)	28	29	30 33 34 37 35 41 42 45	35 5	55

XIII. COMMENTS tenter information by section number) XII-A: Line 1: This waste is a mixture of the compounds shown in XII-C, plus non-hazardous solvents.

XII-A: Line 4: The "Lab Packs" primarily contain commercial rubber

O.... J ENVIRONMENTAL PROTECTION AGENCY

GENERATOR ANNUAL HAZARDOUS WASTE REPORT

For the calendar year ending December 31, 1982

The information requested herein is required by Rules 3745-52-41, 3745-54-75 and 3745-55-75 as applicable of the C Administrative Code.)
REFER TO THE SPECIFIC INSTRUCTIONS CONTAINED IN THIS BOOKLET BEFORE COMPLETING THIS FORM.	
Please print/type with elite type (12 characters per inch)	-
I. GENERATOR'S EPA I.D. NUMBER	
EOHDO 711112239	•
II. NAME OF INSTALLATION	
MIONS ANTO COMPANY	
III. INSTALLATION MAILING ADDRESS	
15 16 SIPIRING SILDE DRIVE 1777 47 48 County Code	-
V. INSTALLATION CONTACT 2 6 41 1 N N EAR L C	*1
VI. TRANSPORTATION SERVICES USED this the name and EPA identification numbers of all hazardous waste transporters whose services were use during the reporting year.	ςĮ
Chemical Waste Management Inc.	

Lecrtify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached decements, and that based on my inquiry of those individuals immediately responsible for obtaining the information. I believe that the submitted information in true, accurate, and complete. I am aware that there are significant penalties for submitting false intormation, including the possibility of line and imprisonment.

VII. CERTIFICATION

OHIO ENVIRONMENTAL PROTECTION AGENCY

Action Code.

GENERATOR ANNUAL HAZARDOUS WASTE REPORT

For the calendar year ending December 31, 19.

to in Cartillar year riong per vii, 19. 329
The information requested herein is required by Rules 3745-52-41, 3745-54-75 and 3745-55-75 as applicable of the Ohi Administrative Code.
REFER TO THE SPECIFIC INSTRUCTIONS CONTAINED IN THIS BOOKLET BEFORE COMPLETING THIS FORM.
PARFA
Please print/type with elite type (12 characters per inch)
I. GENERATOR'S EPA I.D. NUMBER
101HD10171111212139 (1)
1 2 13 14 15
II. NAME OF INSTALLATION
MIDIMISIANITO ICIOMPIAMYIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII
III. INSTALLATION MAILING ADDRESS
BIZIGO ISPRINIGSIDE DRITNE IIII
15 16 45
Street or P.O. Box
13/A: KIRIONI
City or Town State Zip Code
IV. LOCATION OF INSTALLATION
5 260 5 PRINGSII DE DRITVE 1 177
15 16 45 47 48 County Code
6 AKRION 111111111111111111111111111111111111
City or Town State Zip Code Primary SIC Code
V. INSTALLATION CONTACT
2641NM EARL C. 11111111111111111111111111111111111
15 16 Name (last and first) 45 46 Phone No. (area code & no.)
VI. TRANSPORTATION SERVICES USED (list the name and EPA identification numbers of all bazardous waste transporters whose services were used during the reporting year.
Chemical Waste Management Inc.
Chemical Waste Management Inc.
VII. CERTIFICATION

Lecrtify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information in true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Earl C. Guinn

Store keeper

East C. Sumi

2/22/84

Print/Type Name

Title

Significe of Authorized Representati

IN. C.

C. ..O ENVIRONMENTAL PROTECTION AGE: !CY

GENERATOR ANNUAL HAZARDOUS WASTE REPORT (cont.)

For the calendar year ending December 31, 19 83

C . C	1		
FAC II	$H \times IVI$	-C DRAA	ATION

(specify facility to which all wastes on this page were sent)

VIII. GENERATOR'S EPA I.D. NO.

IA. PACIENT 3 ETA I.B. NO. X. TACIENT NAME		ar and an artist of the second
MILITIOPIOIGIZIZAIGIS CIMEMITICALI XI. FACILITY'S ADDRESS	MASITE MANA, GIEMENTI FINICI	, 5g
P. 101. BIOIX 1551 1 1 1 1 1 1 1 1 28 Street or P.O. Box		لللا
EHELLE IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	State Zip Cod	
A. DESCRIPTION OF WASTE 1 Waste, Flammable, W.O.S. 2 WN 1993 3 Hazardous Waste, Solid, N.O.S. 5 ORM-E, NA 9189 (Lab Packs) 6 7 8 9 10		TO C. UNIT OF MEASURE (Enter Code)
11 12 XIII. COMMENTS tenter information by section number)	28 29 \(\begin{array}{cccccccccccccccccccccccccccccccccccc	55

XII-A Line 1: This waste is a mixture of the compounds shown in XII-C. plus some nonehazardous solvents.

XII-A Line 4: The "Lab Packs" primarily contain commercial rubber chemical